



Dr. R. R. Green
375 East 200 North
Heber, UT 84032

October 14, 1997

Re: **Florine Whiting**

Dear Dr. Green:

We recently had the pleasure of evaluating your patient, **Florine Whiting**, in the High Risk Breast Cancer Clinic. This clinic is designed to evaluate individuals who have a strong family history of breast and/or ovarian cancer. The clinic serves two functions. The first is to act as a research resource for investigations into all types of issues related to breast cancer, particularly inherited breast cancer. The second purpose, which is really ancillary to the first, is to provide individuals from these families with education about breast cancer risk, including genetic and dietary information and training on self breast examination. Part of the clinic services, which are provided without cost, includes mammography for women in whom this is appropriate. Testing for BRCA1 and BRCA2 may be performed depending on the availability of affected family members. With the participant's permission, DNA and serum are stored to be used for additional research protocols. A CA-125 test is also performed.

Enclosed are copies of reports generated on your patient. **Please note that Ms. Whiting's CA125 was elevated at 39**, with the normal range being between 0 and 35. We have included for your perusal our patient "Explanation of Test Results" sheet which outlines the follow-up that we recommend for such elevated test results. **Specifically, we suggest that women with elevated CA125s have a pelvic examination and a transvaginal ultrasound to further examine the ovaries.** We would appreciate learning of any follow-up procedures that are planned for Ms. Whiting so that we can remain up-to-date with regard to her care. We have enclosed an envelope for your use should you have any information to forward to us in this regard.

We appreciate the opportunity of carrying out this service for patients and making epidemiological data and biological samples available to researchers. We hope that you, as well as your patients, will find this a useful resource. The genetics of breast cancer is much in the news, but there is very little information on which we can base recommendations to individual patients. We expect that this clinic will provide such information.

Sincerely,

Sandra S. Buys, M.D.
Director, High Risk Breast Cancer Clinic

Enclosure

50 North Medical Drive
2C132 SOM UUHSC
Salt Lake City, UT 84132
(801) 585-3525

WHITING, FLORINE

FEMALE 76 YRS

HRBCC

PATIENT LOCATION: RR

FINAL

HRBCC

4C416 UUMC HEM/ONC

SALT LAKE CITY, UT 84132

005 CONTROL # 14506012

PATIENT# (99852)000-00-0108

RECEIVED: 02OCT97 0528

PRINTED: 04OCT97 0152

SPECIAL CHEMISTRY

SPECIMEN DATE 01OCT97

TIME 1451

REFERENCE UNITS PROCEDURE

TUMOR MARKERS

0-35

U/mL CA 125

39H

The CA 125 assay is indicated for use as an aid in the detection of residual ovarian carcinoma in patients who have undergone first line therapy and would be considered for diagnostic second-look procedures.

High

WHITING, FLORINE

(99852)000-00-0108

PATIENT LOC:

END OF CHART

Explanation of Test Results

CA125 Blood Test for Ovarian Cancer

The CA125 is a blood test which is often elevated in women who have ovarian cancer. Changes in CA125 can be used to monitor the effect of treatment for ovarian cancer. If therapy is effective, CA125 values will fall back to normal; if not, CA125 values may rise.

The CA125 is being evaluated as a method of early detection in women without known ovarian cancer. The effectiveness of screening for ovarian cancer with this blood test is not known. Since the risk of developing ovarian cancer is higher in women who have a family history of breast cancer, CA125 is measured in participants in the High Risk Breast Cancer Clinic.

Approximately 3% of women will have an elevated CA125 (most of these women will be pre-menopausal). A small percent of this group will actually have ovarian cancer. Most will have other causes for an elevated CA125, including endometriosis, pelvic infection, benign tumors of the uterus (fibroids), or benign ovarian cysts. Pregnancy and different phases of the menstrual cycle may also affect CA125 values.

Fluore
Your CA125 result was 39.

CA125 values between 0 and 35 are considered to be normal, while numbers higher than 35 are considered to be elevated. If your value is 35 or lower, you will simply be scheduled for another CA125 in one year according to High Risk Breast Cancer Clinic protocol.

If your value is higher than 35, then please read this section:

If the CA125 value is elevated, we generally recommend to your personal physician that a pelvic examination and ultrasound of the ovaries be performed. If these tests are normal, a repeat CA125 is done at 3 month intervals. If the CA125 returns to normal at this 3-month follow-up test, it is repeated at yearly intervals at the High Risk Breast Cancer Clinic. If the CA125 continues to rise, however, additional studies are sometimes required by your doctor.

High Risk Breast Cancer Clinic
Dietitian's notes

Participant # 9500281

Name Florence Whitung

Date 10/1/97

Ht 159 cm 62.5 in

Wt 55.25 kg 123 lbs

BMI 21.8

Florence has a BMI of 21.8 which is v. close to the normal range. She is taking multiple vitamin/mineral & herbal supplements with a vague recollection of what she actually takes (on back); therefore, we are unsure if any of them are safe. Data given.

Date _____

Wt _____ kg _____ lbs

BMI _____

Date _____

Wt _____ kg _____ lbs

BMI _____

Date _____

Wt _____ kg _____ lbs

BMI _____

Date _____

Wt _____ kg _____ lbs

BMI _____